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Bib Data Sheet

CONFIRMATION NO. 7626

SERIAL NUMBER 10/686,248	FILING DATE 10/15/2003 RULE	CLASS 002	GROUP ART UNIT 3765	ATTORNEY DOCKET NO. FA/260
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APPLICANTS

Gregory E. Hannon, Newark, DE;

 William G. Hardie, Landenberg, PA;
 Timothy J. Smith, Wilmington, DE;

** CONTINUING DATA *****

- None - *JP*

** FOREIGN APPLICATIONS *****

- None - *JP*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 01/15/2004

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged Examiner's Signature <i>[Signature]</i> Initials <i>[Initials]</i>	STATE OR COUNTRY DE	SHEETS DRAWING 7	TOTAL CLAIMS 15	INDEPENDENT CLAIMS 3
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ADDRESS

 28596
 GORE ENTERPRISE HOLDINGS, INC.
 551 PAPER MILL ROAD
 P. O. BOX 9206
 NEWARK, DE
 19714-9206

TITLE

Liquidproof seam for protective apparel

FILING FEE RECEIVED 900	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue)